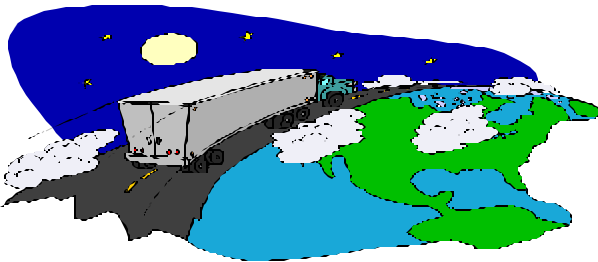


## LET'S ROLL!



The division of Behavioral Health Services is moving. As of July 7, 2003 our new address and phone number will be:

Behavioral Health Services  
150 North 18<sup>th</sup> Avenue, 2<sup>nd</sup> Floor  
Phoenix, Arizona 85007  
(602) 364-4558

### Pended Encounter Sanction Letters

The revised aged pended encounter sanction letters were sent to the RBHAs the week of May 26.

The following lists the top two error codes sanctioned by AHCCCS for the July through September 2002 quarter and the October through December 2002 quarter:

#### July through September 2002

**F350** "Number of units is invalid for date of service span." (1,344)

**R600** "Medicare coverage indicated but not billed." (675)

#### October through December 2002

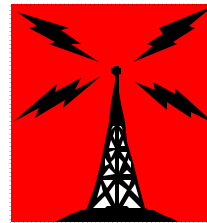
**R600** "Medicare coverage indicated but not billed." (3,359)

**S385** "Service units exceed maximum allowed." (272)

RBHAs must resolve all AHCCCS pended encounters within 120 days of the original processing date. Sanctions will be imposed according to the following schedule:

0 – 120 days	No sanctions
121 – 180 days	\$5.00 per month
181 – 240 days	\$10.00 per month
241 – 360 days	\$15.00 per month
361 + days	\$20.00 per month

### Edit Alerts



*An Edit Alert is a faxed and e-mailed notice of system enhancements or changes. The Office of Program Support strives to ensure any system enhancements or changes are communicated to all program participants in an accurate and reliable manner. Edit Alerts will be distributed when the information is first made available and again with the following monthly publication of the Encounter Tidbits.*

### Respite Services

Respite procedure codes Z3060 (respite services, one hour in duration with a maximum of 12 per day/per client) and Z3070 (respite services, 24 hours in duration) are now calculating correctly in the ADHS/DBHS encounters system.

### Corporate Compliance

Effective October 1, 2003, ADHS and the subcontractors shall be in compliance with 42 CFR 438.608. ADHS and the subcontractors must have a mandatory compliance program, supported by administrative procedures that are designed to

guard against fraud and abuse. The compliance program, which will both prevent and detect suspected fraud or abuse, must include:

1. The designation of a compliance officer and a compliance committee.
2. Effective training and education.
3. Effective lines of communication between the compliance officer and the organization's employees.
4. Enforcement of standards through well-publicized disciplinary guidelines.
5. Provision for internal monitoring and auditing.
6. Provision for prompt response to problems detected.

## AHCCCS Fee For Service Manual Updates

Chapter 5 of the *AHCCCS Fee-For-Service Provider Manual* has been updated to change the data requirements for the CMS 1500 (formally HCFA 1500) claim form and to reflect the new name of the form.

The data requirements for Fields 11, 11a – 11c, and 14 have been changed from “Not required” to “Required if applicable.” This change will assist AHCCCS in identifying any third party liability for a claim.

The change has been made to the on-line version of the manual, available on the AHCCCS Web site at [www.ahcccs.state.az.us](http://www.ahcccs.state.az.us). Providers who have a paper copy of the manual should note this change.

## Data Validation Update

The final sanction letters for Data Validation Studies, Contract Year 18 were sent the week of May 5, 2003.

## Top Monthly Pended Encounters

These edits continue to represent the majority of the pended encounter problems and may be sanctionable.

## R600 – Medicare Coverage Indicated But Not Billed

Encounters are pending because the TPL file indicates the recipient has Medicare coverage, but the claim has been submitted with the Medicare fields blank. If the TPL file indicates a recipient has Medicare, claims must be submitted with a dollar amount. If the service is not a Medicare covered service, zero must be entered in the Medicare fields. A zero value indicates Medicare did not cover or denied the service.



The number of encounters pended for R600 are as follows:

Value Options	4,539
CPSA 5	827
PGBHA	376
NARBHA	195
CPSA 3	83
Excel	28

<b>Total</b>	<b>6,048</b>
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## P295-Service Provider Terminated During Service Date Span

Encounters are pending because the AHCCCS system shows the billing providers enrollment status as terminated prior to the billed dates of service. Providers can check their enrollment status in PMMIS PR070. If a provider feels PMMIS PR070 is incorrect, they should contact AHCCCS Provider Registration at (602) 417-7670.

The number of encounters pended for P295 are as follows:

Value Options	1,397
CPSA 5	1,006
NARBHA	2

<b>Total</b>	<b>2,405</b>
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**H280-Encounters Not Eligible to Adjust**

Encounters are pending because the adjustment submitted is not matching the original. Adjustment encounters must be submitted matching the provider and client ID numbers from the original.

The number of encounters pending for H280 are as follows:

Value Options	2,360
CPSA 3	1
<hr/>	
<b>Total</b>	<b>2,361</b>

If further assistance is needed, please contact your assigned Technical Assistant at:

Javier Higuera (602) 553-9085	Excel Value Options
Shameeka Johnson (602) 553-9083	NARBHA PGBHA
Eunice Argusta (602) 553-9132	CPSA-3 CPSA-5

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**Office of Program Support Staff Updates**

Please join OPS staff in welcoming the latest edition to our team, Eunice Argusta. Eunice comes to our office from the Attorney General's Office, West Valley Child Enforcement Section. Eunice, a two-year state employee, completes the RBHA Rep Team supervised by Kevin Gibson. Welcome aboard Eunice!

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*"I told my psychiatrist that everyone hates me. He said I was being ridiculous – everyone hasn't met me yet."*

*- Rodney Dangerfield*